FORM D

**UNITED STATES** SEGURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR NIFORM LIMITED OFFERING EXEMPTION



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DAT	E RECEI	VED

Name of Offering ( check if this is an amendment and name has changed, and indic	ate change.)
Participating Shares in Savannah-Baltimore Offshore Ltd.	PROCESSE
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Type of Filing: ☒ New Filing ☐ Amendment	Section 4(6) ULOE
A. BASIC IDENTIF	ICATION DATA
Enter the information requested about the issuer	TEATION DATA
Name of Issuer ( check if this is an amendment and name has changed, and indicate Savannah-Baltimore L.P.	change.)  THOMSON FINANCIA
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (including Area Code)
c/o Savannah-Baltimore Capital	
350 Park Avenue, 16 <sup>th</sup> Floor	(212) 310-6547
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (including Area Code)
Brief Description of Business Private Investment Partnership	
Type of Business Organization ☐ corporation ☐ limited partnership, already formed	
☐ business trust ☐ ☐ limited partnership, to be formed	
Month Year	<u> </u>
Actual or Estimated Date of Incorporation or Organization:  0 5 0 5	Actual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service about 1997)	
CN for Canada; FN for other	foreign jurisdiction) F N
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exempti 77d(6).	on under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of secur Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the due, on the date it was mailed by United States registered or certified mail to that address.	address given below or, if received at that address after the date on which it is
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., W.	ashington, D.C. 20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of who photocopies of the manually signed copy or bear typed or printed signatures.	ich must be manually signed. Any copies not manually signed must be
<i>Information Required</i> : A new filing must contain all information requested. Amendment information requested in Part C, and any material changes from the information previous the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemp that have adopted this form. Issuers relying on ULOE must file a separate notice with made. If a state requires the payment of a fee as a precondition to the claim for the ex be filed in the appropriate states in accordance with state law. The Appendix to the notice of the state of the sta	the Securities Administrator in each state where sales are to be, or have been emption, a fee in the proper amount shall accompany this form. This notice shall
ATTEN	TION
Failure to file notice in the appropriate states will not result in a loss of the feder	al exemption. Conversely, failure to file the appropriate federal notice

will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently

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valid OMB control number.

			A. BASIC II	DENTIFICATION DAT	TA .	
2 F	· -	10 1 0	. 11			
		quested for the f				
				zed within the past five ye		% or more of a class of equity securities
	issuer;	wher having the	power to vote of dispos	e, or unect the vote or dis	sposition of, 10	% of more of a class of equity securities
		ficer and directo	or of corporate issuers at	nd of cornorate general ar	nd managing na	rtners of partnership issuers; and
			er of partnership issuers		ra managmg pa	there of partitoromp issue, o, and
	<i>B</i>		F			
Check Box(es)	that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	
Full Name (Las						•
	, Peter M.	,				
		ess (Number an	d Street, City, State, Zip	Code)		
				16th Floor New York,	NY 10022	
Check Box(es)	that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General Partner
Full Name (Las		if individual)				
Lennon, S		,				
		ess (Number an	d Street, City, State, Zip	Code)		
c/o Sava	nnah-Balti	more Capital	350 Park Avenue, 1	l6 <sup>th</sup> Floor New York,	NY 10022	
		•				
Check Box(es)	that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General Partner
	lark, Michel	lle M.				
			d Street, City, State, Zip			
c/o Savai	nnah-Baltii	more Capital	350 Park Avenue, 1	6th Floor New York, I	NY 10022	
Check Box(es)	that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	
Full Name (Las						
Eccles, No		,				
			nd Street, City, State, Zip			
c/o Savai	nnah-Baltii	more Capital	350 Park Avenue, 1	6th Floor New York, I	NY 10022	
Check Box(es)	that Apply:	Promoter	☐ Beneficial Owner		of Director	Managing Member of Managing
			Mat	naging Member of Mana	ger	Member of Manager
Full Name (Las	t name first	if individual)	17141	luging Memoer of Mana	50	Wienlast of Wanager
	, Robert L.	ii iiidividuai)				
		ess (Number an	d Street, City, State, Zip	Code)		
				6th Floor New York, I	NY 10022	
Check Box(es)	that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	Member of Manager     ■
Full Name (Las						Z. Tremer of transfer
Gildenger		ii iiidi 7 iddai j				
		ress (Number an	d Street, City, State, Zip	Code)		
				6th Floor New York, I	NY 10022	
Check Box(es)	that Apply	Promoter	Beneficial Owner	☐ Executive Officer	Director	☑ Member of Manager
Full Name (Las						Internet of Manager
Maher, B		ii iiidividdai)				
		ess (Number an	d Street, City, State, Zip	Code)		
				6th Floor New York, I	NY 10022	
· · · ·			<del></del>			
Check Box(es)	that Apply	Promoter	Beneficial Owner	☐ Executive Officer	Director	Member of Manager     ■
Full Name (Las						
Mulderry		mairiduai)				
		ress (Number an	d Street, City, State, Zip	Code)		
				6th Floor New York, I	NY 10022	
					<del></del>	

						B. INFO	RMATIO	N ABOU	T OFFER	RING					
1.												•••••	Yes	No ⊠	
					A	nswer also	in Append	lix, Column	2, if filing	under ULO	E.				
2.	What is	the minim	num investr	nent that w	ill be accep	ted from an	y individua	ıl? * Subje	ct to the dis	scretion of t	he General	Partner		\$1,000,	000 *
3.	Does th	e offering	permit join	t ownership	of a single	unit?				•••••••••••••••••••••••••••••••••••••••	······································			Yes	No
	remune person	ration for s or agent of	solicitation fabroker o	of purchase r dealer reg	ers in conne istered with	ction with s the SEC a	sales of sec nd/or with a	urities in th a state or st	e offering. ates, list the	If a person name of th	to be listed e broker or	is an assoc dealer. If r	iated nore than		
Answer also in Appendix, Column 2, if filing under ULOE.  2. What is the minimum investment that will be accepted from any individual? * Subject to the discretion of the General Partner															
Not	Appl	icable													
Busine	ess or Re	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)								
Name	of Asso	ciated Brol	ker or Deal	er		<u>.</u>				·					
States	in Whic	h Person I	icted Hac S	Colicited or	Intends to	Solicit Purc	hacero								
(	Check "	All States"	or check ii	ndividual S	tates)	**************		••••••				All States			
ĵ ]	IL] MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
					[.,,]	10.1	(, , )		(		11		[]		
Busine	ss or Re	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)		•						-
Name	of Asso	ciated Brol	ker or Deal	er						_					
States	in Whic	h Person I	isted Has S	Solicited or	Intends to S	Solicit Purc	hasers								
												All States			
,															
] ]	IL] MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
						[01]	[ 11]	_ [VA]	[WA]		[ 44 1]	VV I J	[i K]		
Busine	ess or Re	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)		•		<del>,</del>				
Name	of Asso	ciated Bro	ker or Deal	er									<u> </u>		
					Intends to S	Solicit Purc	hasers								
												All States			
(Cneci	C All S		ieck individ	iuai States)		•					Ц	All States			
] ]	IL]	[IN]	[IA]	(KS)	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	<b>s</b>
	Equity	\$	S
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	<b>\$</b>
	Partnership Interests	<b>\$</b>	\$
	Other (Specify) (participating shares)	\$ 48,550,000	\$ 48,550,000
	Total	<del></del>	\$ 48,550,000
	Answer also in Appendix, Column 3, if filing under ULOE.	<del></del>	1 + 13,555,555
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate
			Dollar Amount of Purchases
	Accredited Investors	7	\$ 48,550,000
	Non-accredited Investors	0	\$ 0
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		<b>s</b>
	Printing and Engraving Costs		\$
	Legal Fees		\$
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total (estimated aggregate expenses to be borne by Issuer)	 ⊠	\$500,000
	, , , , , , , , , , , , , , , , , , , ,		L

	C. OFFEIGHGT RICE	E, NONIBER OF INVESTORS, EXTENSES AND C	SE OF TROCEEDS	
4.	expenses furnished in response to Part C - Question	ing price given in response to Part C - Question 1 and t 4.a. This difference is the "adjusted gross proceeds to		
	issuer."			\$ 48,050,000
5.	the purposes shown. If the amount for any purpose	occeds to the issuer used or proposed to be used for each is not known, furnish an estimate and check the box to dimust equal the adjusted gross proceeds to the issuer so	the	
			Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees (1.2% management fee, subject	to adjustment)	× \$582,600	□ <b>\$</b>
	Purchase of real estate		s	□ \$
	Purchase, rental or leasing and installation of machin	inery and equipment	s	□ s
	Construction or leasing of plant buildings and facili	ties	s	□ <b>s</b>
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets pursuant to a merger)		s	□ <b>\$</b>
	Repayment of indebtedness		s	□ <b>\$</b>
	Working capital (for investments)		s	⊠ \$ 47,467,400
	Other (specify):		□ <b>\$</b>	□ <b>s</b>
	Column Totals		× \$582,600	⊠ \$ 47,467,400
	Total Payments Listed (column totals added)		🛛 \$ 48,05	0,000
		D. FEDERAL SIGNATURE	· · · · · · · · · · · · · · · · · · ·	
n ur		undersigned duly authorized person. If this notice is fi ies and Exchange Commission, upon written request of ule 502.		
	er (Print or Type) annah-Baltimore Offshore Ltd.	Signature Relief h- Endrein	Date June i 5, 2005	
	me of Signer (Print or Type)  Robert L. Friedman	Title of Signer (Print or Type) Managing Member and President of Managing Me	mber of Manager of the Issuer	

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

ATTENTION

E. STATE SIGNATURE										
		resently subject to any of the disqualification		es No						
	,	See Appendix, Column 5, for state respor	se.							
	e undersigned issuer hereby undertakes to rm D (17 CFR 239.500) at such times as	o furnish to any state administrator of any stat required by state law.	e in which this notice is filed, a notice	e on						
	e undersigned issuer hereby undertakes to uer to offerees.	o furnish to the state administrators, upon wri	ten request, information furnished by	the						
<del>Of</del>		ssuer is familiar with the conditions that must which this notice is filed and understands tha iditions have been satisfied.								
	uer has read this notification and knows the thorized person.	ne contents to be true and has duly caused this	notice to be signed on its behalf by the	he undersigned						
	(Print or Type) nah-Baltimore Offshore Ltd.	Signature Relies Revelence	Date June 15, 2005							
	of Signer (Print or Type)	Title (Print or Type)  Managing Member and President of Managing Member of Manager of the Issuer								

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

## APPENDIX

1	Type of security and aggregate offering price offered in State (Part B-Item 1)  3  Type of security and aggregate offering price offered in State (Part C-Item 1)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No	Participating Shares	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									
СО									
СТ									
DE									
DC									
FL									
GA									
HI									
ID									
IL		X	\$48,550,000	1	\$15,000,000	0	0		Х
IN									
IA									
KS									
KY									
LA									
ME									
MD									
MA									
MI									
MN									
MS									
МО									

## APPENDIX

1	Intend non-ac investor	to sell to credited s in State	Type of security and aggregate offering price offered in State (Part C-Item 1)	Type of security and aggregate offering price Offered in State  Type of investor and amount purchased in State					
State	Yes	No	Participating Shares	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MT									
NE									
NV	· · · ·						<del></del>		
NH									
NJ									
NM									
NY		X	\$48,550,000	5	\$23,550,000	0	0		X
NC									
ND									
ОН									
ок									
OR									
PA							<u> </u>		
RI									
SC		<u></u>			<u></u>				
SD									
TN									
TX				200					
UT									ļ
VT									
VA									
WA									
wv									
WI									
WY									
PR									